

THE TECHNICAL DEVELOPMENT BOARD

Report of the Chairman, 1967

As Chairman of the Technical Development Board, I wish first of all to express my personal appreciation to the members of the Board and to the chairmen and members of the associated committees for their diligent and dedicated labors of the past year. Their individual determination to contribute to the science, art, and practice of public health is salutary. To quote Casey Stengel after a successful World Series, "we never could have done it without the players."

A number of proposed resolutions and policy statements from committees have been considered by the Board and several have been referred to the originating committee for further revision. Those which the Board recommends for adoption by the Governing Council are:

Policy Statements:

- Abortion
- Health Planning
- International Health
- Multiple Screening

Resolutions:

- Abortion
- Accountability
- Adverse Reactions to Drugs
- Certification of Ambulance Services
- Discrimination on Boards of Health
- Sexuality

Publication of the paper on "Requirements for Data on Infant and Perinatal Mortality" is forthcoming; it is co-authored by Mr. Sam Shapiro, Iwao M. Moriyama, Ph.D., and Alfred Yankauer, M.D. In addition to publication in the *American Journal of Public Health*, this paper will be widely distributed to professional persons and organizations. It will form a sophisticated basis for

future statistical and public health studies of infant mortality and morbidity. It is hoped that the recommendations appended to the report will help to advance actions toward the understanding of these difficult and complex problems.

The relationships and the tasks of the Board have been altered somewhat during the year as a result of changes made by the Executive Board. The number of members-at-large without direct committee responsibilities has been reduced from six to four, since one such member also chairs the Committee on Health Manpower and one chairs the Committee on the Environment. The decision to regularly invite the chairman of the Committee on Public Policy to TDB meetings will help to expedite policy review and formulation. The pattern of relationships to the new Committee on Public Interpretation remains to be determined.

The duties of the Board and its committees will be altered by three types of impetus: (1) National Commission on Community Health Services (NCCHS) and Task Force reports have generated follow-up responsibilities; (2) a joint meeting of the Committee on Public Policy and Legislation and the Resolutions Committee produced several new tasks or altered old ones as interpreted and forwarded to the TDB by the Executive Board; (3) the committees have, as in other years, set themselves a variety of new tasks and objectives. Since many months are usually required to complete committee work on each assignment, the number of uncompleted items has grown substantially during the year.

The backlog of work yet to be performed is larger than ever and it is apparent that the Association's capacity to envision what should be done obviously exceeds its capacity to perform the work. Nonetheless, we believe the committees will continue to fulfill many of their obligations each year.

The activation of Community Health, Inc., which is designed to implement recommendations of the commission, is indeed welcome. This new organization will create new opportunities for productive relationships.

The Executive Board established three priorities for Technical Development Board follow-up on NCHS positions and recommendations: (1) community of solution, (2) environmental control, (3) organization, administration, and financing of official health agencies. Since these priorities and other follow-up tasks fall especially heavily on two PACs—Medical Care Administration and Public Health Administration—the chairmen of these committees have met with staff and agreed on follow-up responsibilities. The impact of these new tasks will be considered by the Board during the coming year. It is noteworthy that these same two PACs were also loaded anew with suggestions forwarded by the Executive Board as a result of the joint meeting of the Committee on Public Policy and Legislation and the Committee on Resolutions.

Responsibility for developing a policy statement on the relationship between comprehensive health planning, regional medical programs and hospital regional planning councils was accepted by the Program Area Committee on Medical Care Administration.

Responsibility relating to neighborhood health centers, programs of the Office of Economic Opportunity, mental health services, health department services, group practice influence on patterns of health service delivery, and relationships between these, was also accepted by the PAC on Medical Care Administration.

Responsibility for developing recommendations relating to Medicare and Medicaid was accepted as the joint responsibility of the

PACs on Medical Care Administration and Public Health Administration.

Responsibility for acting jointly with the Maternal and Child Health Section and, it is hoped, with the American Academy of Pediatrics in developing a nationwide program on child health was accepted by the Program Area Committee on Child Health.

Highlights of Program Area Committee Activities

Air Pollution—Leslie A. Chambers, Ph.D., chairman

This committee is actively engaged in revising the "Health Officials' Guide to Air Pollution Control" and developing a policy statement on "Health Aspects of Air Pollution." Other items under consideration are a resolution concerning a national fuel policy, and developments of criteria for particulates in the atmosphere. The committee also plans to review the criteria for ambient air quality developed by the Public Health Service.

Child Health—Paul F. Wehrle, M.D., chairman

The series of guides on specific types of childhood disability is being continued with a revision of the "Cerebral Palsy" item published and two others in preparation. At the same time the committee is pursuing its interest in preparation and issuance of a comprehensive volume on the whole field of childhood disability.

"Requirements for Data on Infant and Perinatal Mortality" was completed and, as suggested by the Executive Board, printed in the American Journal of Public Health. Extensive distribution of reprints is contemplated for this significant document.

A resolution was prepared and submitted, entitled "Helping Youth Achieve Normal Sexuality."

Preliminary plans were made for a possible convocation of national agencies and organizations to prepare a re-

port on comprehensive health care for children.

Chronic Disease and Rehabilitation — William J. Peebles, M.D., chairman

A chronic disease planning session has been provided for presentation as a technical session at the present Annual Meeting.

Plans for preparation of a chronic disease planning guide are going forward.

A proposed policy statement on "Multiple Screening" was approved for submission to the Governing Council.

The Subcommittee on Alcoholism anticipates publication of its program guide within a few months; short-term training courses are being offered in conjunction with the Southern Branch.

Communicable Diseases — Leonard M. Schuman, M.D., chairman

Plans are under way to produce the 1970 edition of "Control of Communicable Diseases in Man." Dr. Benenson has accepted the responsibility of serving as editor.

A special committee activity was a two-day conference with officials of the E. I. Du Pont Company to consider the possibility of co-developing an influenza alert program. The committee advised development and application of rapid viral identification tests, rigidly controlled field trials in settings of anti-viral agents, and innovative procedures for surveillance programs.

Efforts continue to finance publication of the Journal supplement on communicable disease.

Community Mental Health and Mental Retardation—Paul V. Lemkau, M.D., chairman

Principal activity has been the development of plans for future committee concerns. Under consideration are guides for mental health and mental retardation programing.

Drugs—Theodore J. Bauer, M.D., chairman

A proposed policy statement on adverse drug reactions was completed and submitted. Committee members met with Association staff to develop congressional testimony. "Guidelines for Human Studies in Public Health Agencies" is in preparation. Plans are being made to improve liaison with federal and state food and drug agencies.

Environmental Health — H. Clifford Mitchell, chairman

Concerns of the committee include noise and its effect on man, the safe use of pesticides, and urban planning and development.

Housing and Health—Charles L. Senn, P.E., chairman

The revised Housing Code is being field tested; a "Guide for Health Administrators in Housing Hygiene" has been completed. Funds are actively being sought to provide staff to complete new or revised housing publications, such as "Basic Principles of Health for Housing," and "Appraisal of Housing and Residential Environment." Work is in progress on "Designing, Maintaining and Managing the Residential Environment." Numerous future activities are in view.

Injury Control and Emergency Services —Paul V. Joliet, M.D., chairman

Principal activity has related to the involvement of health departments in highway safety programs and emergency medical services in the various states.

A proposed resolution on certification of ambulance services under the provisions of Medicare legislation has been submitted by the PAC directly to the Resolutions Committee.

International Health—Carl E. Taylor, M.D., chairman

A policy statement on "International Health" has been submitted. Plans for further activities are under development.

Medical Care Administration—Cecil G. Sheps, M.D. chairman

Work continues on Volumes II and III of the "Guide to Medical Care Administration." A proposed resolution on accountability has been submitted.

Using the committee's documents on regionalization of health services, it is planned to develop a contract and funding for an analytical study of regionalization.

Population and Public Health—Leslie Corsa, Jr., M.D., chairman

Activities previously reported are continuing. The addition of full-time staff under a Ford Foundation grant is augmenting the committee's activities, especially in developing continuing education opportunities, seeking additional support for family planning programs, and program consultation.

Public Health Administration—Paul Q. Peterson, M.D., chairman

A proposed policy statement on "Principles of Health Planning" has been completed and submitted. Editing of the manuscript of the second edition of "Administration of Community Health Services" was completed and early publication is expected by the International City Managers Association. A resolution aimed at abolishing discrimination on boards of health has been forwarded to the Resolutions Committee. Under revision are the Association's policy statements on state and local health agencies. A Subcommittee on Emergency Health has been appointed and one on Health Planning is in prospect.

Conclusion

Approval is recommended for the policy statements and resolutions submitted by the Board and its constituent committees.

Your review of the Board's report of activities is invited and your comments will be welcomed.

We would like to say in closing that this Annual Meeting of the American Public Health Association is demonstrating—as perhaps no other has—that public health has burst its traditional boundaries.

We are reaching into concerns undreamed of in the past.

A central mission of the Technical Development Board is to explore public health's new boundaries and map the territory. The Board has responded to this task by coordinating the work of a growing list of new committees. These committees have done outstanding exploratory work. The result has been a growing list of projects that need to be carried out.

But the pile of projects in many a committee's in-basket is considerably larger than the finished work in its out-baskets.

Is this a reflection of the committees' willingness to work? Not a bit. For, by and large, the work turned out by these committees of busy, professional volunteers has been prodigious.

I submit that the problem rests in the sheer size of the task to be done in this era of growth for public health.

And I also submit that this flow of new projects is a vital mark of the Association's vitality; the work of the TDB committees is the very yeast of our Association.

But you cannot make a brew with just yeast. You need some malt, too. And the malt is the full-time, professional staff of the Association.

The time has come, I believe, to add some malt. I have made a number of

recommendations to meetings of the Executive Board and to other members of the committee in the past that we do need more staff to help implement the suggestions and the work of the volunteers which, essentially, all of us are. I think the time has come to reestablish the position of field director. This position would add greatly to the Association's effectiveness, particularly in the burgeoning field of health planning. The same person could also provide valuable consultation services to states and localities.

The value of such a service will call for a substantial commitment by the Association. In my view, it would be money well spent. This is a good time to consider it.

HOLLIS S. INGRAHAM, M.D.

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Report of the chairman of the Technical Development Board to the Governing Council of the American Public Health Association at the Ninety-Fifth Annual Meeting in Miami Beach, Fla., October 22, 1967.

Urgently Needed

The January, February, March, June, October, and November, 1967, issues of the American Journal of Public Health are urgently needed. The Association will be grateful if members donate these issues.

Please send Journals to: Boyd Printing Company, 49 Sheridan Ave., Albany, N. Y. 12210. Att.: Mr. H. Quelmalz.